# **DESE WEB Login ID Request Form – Sheltered Workshops**

### **Instructions:**

Fill in the First, Middle and Last Name, Birth Date and Mother's Maiden Name for each staff member that you want to be able to perform the functions described. You may provide more than one name for each role, although only one is expected for the SW Manager role. Please make a copy of the blank form if additional room is needed.

Note: The Birth Date and Mother's Maiden Name are needed to verify the identity of the user in the event that they need to call the security administrator to request logon ID or password information.

## **Sheltered Workshop Roles:**

- **SW Data entry** This person will be able to:
  - o Enter monthly time sheet information for employees
  - o Change employee information
- **SW Manager** This person will be able to:
  - o Enter monthly time sheet information for employees
  - o Change employee information
  - Approve/Submit monthly time sheet information for the workshop
  - Hire applicants to your workshop
  - o Transfer employees to your workshop
  - o Reinstate employees to your workshop
  - o Terminate employees from your workshop

#### 

| First Name | Middle Name | Last Name | Birth Date | Mother's Maiden Name |
|------------|-------------|-----------|------------|----------------------|
|            |             |           |            |                      |
|            |             |           |            |                      |
|            |             |           |            |                      |
|            |             |           |            |                      |
|            |             |           |            |                      |

#### SHELTERED WORKSHOP SW MANAGER

| First Name | Middle Name | Last Name | Birth Date | Mother's Maiden Name |
|------------|-------------|-----------|------------|----------------------|
|            |             |           |            |                      |
|            |             |           |            |                      |

| Sheltered Workshop Name |  |
|-------------------------|--|
| Authorizing Signature   |  |
| Date                    |  |